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PTO/SB/22 (11-07)
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TREATION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)				Docket Number (Optional)		
FY 2008				27656/40537		
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)						
Application Number 10/512,001-Conf. #2325				Filed S	September 8, 2005	
For METHOD FOR THE IDENTIFICATION OF MODULATORS OF A SECRETASE ACTIVITY						
Art Unit 1636				Examiner	J. S. Ketter	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.						
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):						
	<u>Fee</u>			Small Entity Fe	<u>e</u>	
	x One month	(37 CFR 1.17(a)(1))	\$120	\$60	\$	60.00
	Two month	s (37 CFR 1.17(a)(2))	\$460	\$230	\$	
	Three mon	ths (37 CFR 1.17(a)(3))	\$1050	\$525	\$	
	Four month	ns (37 CFR 1.17(a)(4))	\$1640	\$820	\$	
	Five month	s (37 CFR 1.17(a)(5))	\$2230	\$1115	\$	
x Applicant claims small entity status. See 37 CFR 1.27.						
A check in the amount of the fee is enclosed.						
Ħ	Payment by credit card. Form PTO-2038 is attached.					
	The Director has already been authorized to charge fees in this application to a Deposit Account.					
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to						
Deposit Account Number 13-2855 . I have enclosed a duplicate copy of this sheet.						
WARNING: Information on this form may become public. Credit card information should not be included on this form.  Provide credit card information and authorization on PTO-2038.						
I am the applicant/inventor.						
assignee of record of the entire interest. See 37 CFR 3.71.						
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
x attorney or agent of record. Registration Number 31,879						
attorney or agent under 37 CFR 1.34.						
Registration number if acting under 37 CFR 1.34						
				December 4, 2007		
Signature Date						
_	Jeffrey S. Sharp			(312) 474-6300		
Typed or printed name				Telephone Number		
NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
	Total of	1 forms are subr	nitted.			

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. postal service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Dated: December 4, 2007

Signature:

(Jeffrey S. Sharp)

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